

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 018563-006700US				
<p>I hereby certify that this correspondence is being filed via EFS-Web with the United States Patent and Trademark Office on <u>August 10, 2007</u></p> <p>Signature <u>Jamie Vrsek</u></p> <p>Typed or printed name <u>Jamie Vrsek</u></p>		<p>In re Application of ERIC KUO</p> <table border="1"> <tr> <td>Application Number 10/612,239</td> <td>Filed July 1, 2003</td> </tr> </table> <p>For DENTAL APPLIANCE SEQUENCE ORDERING SYSTEM AND METHOD</p> <table border="1"> <tr> <td>Art Unit 3732</td> <td>Examiner WILSON, JOHN J.</td> </tr> </table>	Application Number 10/612,239	Filed July 1, 2003	Art Unit 3732	Examiner WILSON, JOHN J.
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Art Unit 3732	Examiner WILSON, JOHN J.					
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p>						
<p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500</p>						
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>20-1430</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for a three-month extension of time under 37 CFR 1.136(a) (PTO/SB/22) was included with the Response filed on July 24, 2007, extending the due date until August 13, 2007.</p>						
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>						
<p>I am the</p> <p><input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>52,182</u> _____ 206-467-9600 Telephone number</p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____ August 10, 2007 Date</p>						
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p>						

*Total of _____ forms are submitted.